## UTILITY PATENT APPLICATION TRANSMITTAL

Attorney Docket No.:		03-099		
First Inventor:		Richard Carlton Mattison		
Title:	ELECTROACTIVE POLYMER ACTUATED SHEATH FO IMPLANTABLE OR INSERTABLE MEDICAL DEVICE			

Express Mail Label No.: ER 638132081 US (Only for new nonprovisional applications under 37 CFR 1.53(b))

APPLICATI	ON BLEMENTS		Mail Stop Patent Application			
(see MPEP chapter 600 concerning ADDRESS TO:			Commissioner for Patents			
utility patent application contents)			P.O. Box 1450			
, ,,		Alexandria, VA 22313-1450				
1. X Fee Tre	ansmittal Form in duplicate	7. CD-ROM or CD-R in duplicate, large				
(Submit an original and a duplicate for fee processing)			table or Computer Program (Appendix)			
	ant claims small entity status		8. Nucleotide and/or Amino Acid Sequence			
See 37 CFR 1.27			(if applicable, all necessary)			
3. X Specification Total Pages 16			a. Computer Readable Form (CFR) b. Specification Sequence Listing on:			
	red arrangement set forth belo tive title of the invention	ow)	i. CD-ROM or CD-4 (2 copies);			
	Reference to Related Applicat	ions	ii. or paper			
-Statement Regarding Fed sponsored R&D			c. Statements verifying identify of above copies			
-Reference to sequence listing, a table,			ACCOMPANYING APPLICATION PARTS			
-Reference to sequence rising, a case, -Background of the Invention			9. X Assignment Papers (cover sheet & document(s))			
<del>-</del>	ummary of the Invention		, 11			
	escription of the Drawings (if file	.d	10. 37 CFR 3.73(b) X Power of Attorney			
	d Description		Statement (when there is an assignee)			
-Detailed -Claim(s	•		11. English Translation Document (if applicable)			
	t of the Disclosure		(1) approximation by comment (1) approache)			
710044	, or no passone		12. IDS Copies of IDS Citations			
4. X Drawii	ng(s) Total Sheets	4	13. Preliminary Amendment			
5. Oath or De		استنسا	14. X Return Receipt Postcard (MPEP 503)			
		' '				
a. X	Newly executed (original or	copy)	15. Certified Copy of Priority Document			
	CFR 1.63(d)) (for continuation	on/ divisional with	122(b)(2)(B)(i). Applicant must attach form			
	Box 18 completed)		PTO/SB/35 or its equivalent			
i.	DELETION OF INVE		17Other:			
	inventor(s) named in the price					
	see 37 CFR 1.63(d)(2) and 1	••				
6. Applie	ation Data Sheet under 37					
			by the requisite information below and in a preliminary amendment:			
		_				
Continuation	Divisional Divisional	Continuation-i	n-Part (CIP) Prior Appl. No.			
Prior Appl. information:	Prior Appl. information: Examiner: Group/Art Unit:					
FOR CONTINUATION	OR DIVISIONAL APPS only:	The entire disclosure of	of the prior application, from which an eath or declaration is supplied			
under Box 5b, is conside	ered a part of the disclosure of the	accompanying continu	uation or divisional application and is hereby incorporated by reference.			
The incorporation can or	nly be relied upon when a portlor	n has been inadvertently	omitted from the submitted application parts.			
	1	O. CORRESPONDE	NCE ADDRESS			
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Address	251 North Avenue We					
City	Westfield State NJ Zip Code 07090					
Country	U.S.A. Telepl		703-433-0510 Fax 703-433-2362			
	Name David B. Bonham Registration No. 34,297					
SIGNATURE						
CICITAL VIOL						

Signature



FEE
<b>TRANSMITTAL</b>

Complete if Known **Application Number** Unassigned Filed Herewith Filing Date First Named Inventor Richard Carlton Mattison Examiner Name Unassigned Group Art Unit Unassigned

Patent fees are subject to annual revision (\$) 864 TOTAL AMOUNT OF PAYMENT Attorney Docket No. 03-099 FEE CALCULATION (continued) METHOD OF PAYMENT 3. ADDITIONAL FEES The Commissioner is hereby authorized to charge indicated fees and Small credit any overpayment to: Large Enfity EMIX Deposit Account Number 50-1047 Fee Fœ Fee Fee Mayer Fortkort & Williams Deposit Account Name Code (\$) (\$) Code Fee Description 130 2051 1051 65 Surcharge - late filing fee or oath Charge Any Additional Fee required under 37 CFR 1.16 and 1.17 Surcharge - late Provisional filing 1052 2052 25 50 130 1053 1053 130 Non-English specification Applicant claims small entity status. See 37 CFR 1.27 2520 147 2520 For filing a request for ex parts 147 Reexamination 2. Payment Enclosed: 1804 920\* 1804 9201 Requesting publication of SIR prior to Examiner action Requesting publication of SIR after Credit Card Money Order Other 1805 18401 1805 1840\* Check Examiner action 1251 110 2251 55 Extension for reply within first month 1252 420 2252 210 FEE CALCULATION Extension for repty within second month 950 2253 1253 475 Extension for reply within third month 1254 1480 2254 740 1. BASIC FILING FEE Extension for reply within fourth month 1255 2010 2255 1005 Extension for reply within titth month 1401 330 2401 165 Notice of Appeal Entity Small Entity Large 1402 330 2402 165 Filing a brief in support of an appeal Fee Fee Fee Fee Request for oral hearing Code **(5)** Code (5) Fee Paid 1403 290 2403 145 Petition to institute a public use 1510 1451 1510 1451 bucesequid 2452 Petition to revive · unavolciable 1001 770 2001 385 Utility filing tee 770 1452 1930 665 1453 1330 2453 665 Petition to revive - unintentional 1002 340 2002 170 Design filing fee 530 2003 265 Plant filing fee 1501 1230 2501 665 Utility issue fee (or reissus) 1003 1502 480 2502 240 Design (assue fee 1004 770 2004 385 Relacue filing fee 2005 1503 640 2503 320 Plant issue fee Provisional filling fee 1005 180 Petitions to the Commissioner 1460 130 1460 130 1807 Processing fee under 37 CFR 1,17(a) SUBTOTAL (1) (\$) 770 1807 50 50 1808 180 1806 180 Submission at IDS 2. EXTRA CLAIM FEES 8021 **Previously** Extra Fee from 8021 40 40 Recording each patent assignment Fee Paid per property (times number of pro-Petd\* Claims below 1809 770 2809 385 Films a submission after final Total Claims 20 3 18 54 rejection (37 CFR § 1.129(a)) Independent Claims 86 0 1810 770 2810 385 For each additional invention to be examined (37 CFR § 1.129(b)) 280 Multiple Dependent 1801 770 2801 385 Request for Continued Examination Entity Smell Entity Large Fee Fee (RCE) Fee Fee Request for expedited examination Code (\$) Code (\$) Fee Description 1802 900 1802 900 2202 9 Cizims in excess of 20 Independent claims in excess of 3 of a design application 1202 1201 86 2201 Other fee (specify) 145 Multiple dependent claim. If not paid 1203 280 2203 2204 43 Reissue independent claims over original parant 1204 88 1205 18 2205 9 'Reissue dains in excess of 20 and over original SUBTOTAL (2) (§) 54 FOR NUMBER PREVIOUSLY PAID, IF GREATER THAN STANDARD ALLOWANCE. \* Reduced by Basic Filling Fee paid SUBTOTAL (3) For Reissues, see above Complete (if applicable) SUBMITTED BY 703-433-0510 Registration No. | 34,297 David B. Bonham Telephone Name (Print/Type) 7 B.

2003

Date

NOV.

CERTIFICATE OF I	Docket No. 03-099					
Serial No. Unassigned	Filing Date Filed Herewith	Examiner Unassigned	Group Art Unit Unassigned			
Invention: ELECTROA MEDICAL I	CTIVE POLYMER ACTUATED DEVICE	SHEATH FOR IMPLANTABLE	OR INSERTABLE			
I hereby certify that the	e following correspondence:		6			
New U.S. Patent Appli	cation		· •			
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is being deposited with	n the United States Postal Service	e "Express Mail Post Office to Ad	dressee" service under 37			
CFR 1.10 in an envelo	pe addressed to: Commissioner	for Patents, P.O. Box 1450, Alexa	andria, VA 22313-1450 on			
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